Amendments to the Claims:

This listing of claims will replace all prior versions, and listing, of claims in the

application:

Listing of Claims:

Claim 1 (canceled)

Claim 2 (currently amended): The method as recited in claim 24, wherein the discount

price list is a variable discount price list that tracks a known standard service/good price

list.

Claim 3 (previously presented): The method as recited in claim 24, wherein the

membership fee is paid by the individual.

Claim 4 (previously presented): The method as recited in claim 24, wherein the

membership fee is paid by the individual's employer.

Claim 5 (previously presented): The method as recited in claim 24, wherein the

membership fee is paid by the individual's business.

Claim 6 (previously presented): The method as recited in claim 24, wherein the

membership fee is a renewal fee.

Claim 7 (previously presented): The method as recited in claim 24, wherein the member

includes his/her family in the health care plan.

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Claim 8 (previously presented): The method as recited in claim 24, wherein the medical service/good providers are selected from the group consisting of physicians, hospitals, physical therapists, nursing facilities, cancer treatment centers, optical and hearing aid dispensaries, hospices, clinics, pharmacies, chiropractors, dentists, medical supply stores,

hospital supply stores and handicap equipment suppliers.

Claim 9 (previously presented): The method as recited in claim 24, wherein the medical

service/good provider is a doctor that works for a corporation.

Claims 10-11 (canceled)

Claim 12 (currently amended): The method as recited in claim [[11]] 24, wherein the

basic listings are provided to medical service/good providers free of charge.

Claim 13 (currently amended): The method as recited in claim [[11]] 24, wherein the

premium listings are provided to medical service/good providers upon payment of a

premium listing fee.

Claim 14 (currently amended): The method as recited in claim [[11]] 24, wherein the

premium listings include a link to a customizable web page for the medical service/good

providers that is accessible via a global telecommunications network.

Claim 15 (currently amended): The method as recited in claim [[11]] 24, wherein the

premium listings include a link to the medical service/good provider's web site.

Claim 16 (currently amended): The method as recited in claim [[11]] 24, wherein the

premium listings are customized for each medical service/good provider.

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Claim 17 (currently amended): The method as recited in claim [[10]] 24, wherein the

discount price list and the medical service/good provider listing is accessible via a global

telecommunications network.

Claim 18 (currently amended): The method as recited in claim [[10]] 24, wherein the

discount price list and the medical service/good provider listing are searchable by the

members using one or more search criteria.

Claim 19 (previously presented): The method as recited in claim 18, wherein one of the

search criteria is based on geographic area

Claim 20 (previously presented): The method as recited in claim 18, wherein one of the

search criteria is based on the services and goods provided by the medical service/good

providers.

Claim 21 (previously presented): The method as recited in claim 24, further comprising

the step of providing one or more advertisements by the network provider to the

members.

Claim 22 (previously presented): The method as recited in claim 21, wherein an

advertiser pays the network provider an advertising fee to provide the advertisements to

the members.

Claim 23 (previously presented): The method as recited in claim 21, wherein the

advertisement provided to a member is based on one or more search criteria used to

search the medical service/good provider listing.

Claim 24 (currently amended): A method for providing a health care plan comprising the

steps of

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receiving a membership fee from one or more individuals to become members of the health care plan and participate via incentives within a member multi-level marketing network;

obtaining information from one or more medical service/good providers that have joined the health care plan <u>and incorporating all or part of the obtained information in a medical service/good provider listing comprising basic listings and premium listings for the medical service/good providers; and</u>

providing a discount price list <u>and the medical service/good provider listing to the members</u> that regulates the cost of services/goods provided to the members by the medical service/good providers such that the members pay the medical service/good providers in-full directly for any services/goods rendered <u>to the members</u> based on the discount price list.

Claim 25 (currently amended): A computer program embodied on a computer readable medium executable by a server for providing a health care plan comprising:

a code segment for receiving a membership fee from one or more individuals to become members of the health care plan and participate via incentives within a member multi-level marketing network;

a code segment for obtaining information from one or more medical service/good providers that have joined the health care plan <u>and incorporating all or part of the obtained information in a medical service/good provider listing comprising basic listings and premium listings for the medical service/good providers; and</u>

a code segment for providing a discount price list <u>and the medical service/good</u> <u>provider listing to the members</u> that regulates the cost of services/goods provided to the members by the medical service/good providers such that the members pay the medical service/good providers in-full directly for any services/goods rendered <u>to the members</u> based on the discount price list.

Claim 26 (currently amended): An apparatus for providing a health care plan

comprising:

a server;

one or more storage devices communicably coupled to the server, the one or more

data storage devices containing a discount price list and a medical service/good provider

listing to the members that regulates the cost of services/goods provided to a member of

the health care plan by a medical service/good provider such that the member pays the

medical service/good provider in-full directly for any services/goods rendered to the

members based on the discount price list, wherein the medical service/good provider

listing comprises basic listings and premium listings for the medical service/good

providers;

a communications interface communicably coupled to the server that allows a

member to access the discount price list; and

wherein the member is an individual that has paid a membership fee to join the

health care plan and participate via incentives within a member multi-level marketing

network.

Claim 27 (canceled)

Claim 28 (currently amended): A method for providing a health care plan comprising the

steps of

receiving a membership fee from one or more individuals to become members of

the health care plan;

obtaining information from one or more medical service/good providers that enter

the health care plan and participate via incentives within a provider multi-level marketing

network, and incorporating all or part of the obtained information in a medical

service/good provider listing comprising basic listings and premium listings for the

medical service/good providers; and

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providing a discount price list and the medical service/good provider listing to the members that regulates the cost of services/goods provided to the members by the medical service/good providers such that the members pay the medical service/good providers in-full directly for any services/goods rendered to the members based on the discount price list.

Claim 29 (currently amended): A computer program embodied on a computer readable medium executable by a server for providing a health care plan comprising:

a code segment for receiving a membership fee from one or more individuals to become members of the health care plan;

a code segment for obtaining information from one or more medical service/good providers that have joined the health care plan and participate via incentives within a provider multi-level marketing network, and incorporating all or part of the obtained information in a medical service/good provider listing comprising basic listings and premium listings for the medical service/good providers; and

a code segment for providing a discount price list and the medical service/good provider listing to the members that regulates the cost of services/goods provided to the members by the medical service/good providers such that the members pay the medical service/good providers in-full directly for any services/goods rendered to the members based on the discount price list.

Claim 30 (currently amended): An apparatus for providing a health care plan comprising:

a server;

one or more storage devices communicably coupled to the server, the one or more data storage devices containing a discount price list and a medical service/good provider listing to the members that regulates the cost of services/goods provided to a member of the health care plan by a medical service/good provider such that the member pays the medical service/good provider in-full directly for any services/goods rendered to the Reply to Office action of Oct. 3, 2007

members based on the discount price list, wherein the medical service/good provider listing comprises basic listings and premium listings for the medical service/good providers;

a communications interface communicably coupled to the server that allows a member to access the discount price list; and

wherein the member is an individual that has paid a membership fee to join the health care plan and the medical service/good provider joins the health care plan and participates via incentives within a provider multi-level marketing network.